

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	TH	148-	11-30-01
RESPONSE FORMALITY REVIEW	<i>[Signature]</i>	100	2-1-02

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	9/4/03
1	2/2/04
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Claim	Date
Final	
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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932-03-01
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 02/11/02